



Procedure: Notification of Rights & Responsibilities

Functional Area: VIII Certification, Eligibility & Coordination of Services

Section: G 2 b

Approval Date: 6/2015

Citation: 246.7(i)(10); 246.7(j)

Revised Date: 6/2013

Purpose	Describe how each applicant and client is to be informed of his/her rights and responsibilities.
Federal Requirements	Federal regulations require that each applicant, parent, or other individual enrolling a minor read or be read his rights and responsibilities and sign that they have read the statement at each certification period.
Providing An Overview of Rights	The assigned staff member must give a brief overview of the Client Agreement to each applicant or client, or the individual enrolling a minor to help insure the person understands what he is signing. This overview should be given prior to collecting data for or determining any portion of eligibility.
Where to Find Rights	<p>The rights and responsibilities for the Nebraska WIC Program are a part of the WIC Signature Form and WIC Food Brochure.</p> <p>The current Rights & Responsibilities and How to Request a Fair Hearing may be found later in this procedure.</p>
Translations	<p>The rights and responsibilities must be written in a language appropriate for the individual. Translation of the rights and responsibilities into languages other than English is completed by the State WIC office.</p> <p>The Spanish translation of the Certification Signature Form is available from the State WIC office.</p> <p>When the applicant, client, parent or guardian speaks and/or reads a language for which the program has no written translation, a translator must read the entire Rights & Responsibilities and Requesting a Fair Hearing to them.</p>
Informing Persons Who are Unable to Read	<p>A staff member should read the Rights & Responsibilities to any person(s) who is unable to read because of:</p> <ul style="list-style-type: none">• Limited English skills• Eyesight problems• Limited or no reading ability

Documentation

After reading or having been read the rights and responsibilities, the applicant or client, or the individual enrolling a minor must sign, date, and indicate their relationship to the applicant on the certification signature form.

Retention

The signed WIC Certification Signature Form must be retained in the applicant/client's file.

Applicant's Copy

The applicant/client receives a copy of the rights and responsibilities at the initial application visit. This copy as part of the WIC Food Brochure is placed in each ID Folder.

Applicants/clients may request a copy of the directions for Requesting a Fair Hearing from their local WIC agency.

**Ordering Food
Brochures & Signature
Forms**

The Food Brochure and WIC Certification Signature Forms may be ordered using the WIC Materials Order Form.

CLIENT'S RIGHTS AND RESPONSIBILITIES

Your Rights:

- WIC will provide you with information about nutrition, breastfeeding, and healthy foods.
- WIC will help you in getting other services, like Immunizations, SNAP and Medicaid
- All information I give WIC will be kept private.
- If you disagree with a decision regarding my WIC eligibility, I may request a fair hearing. My request must be made within 60 calendar days of when the written denial or termination of benefits was mailed or given to me. WIC staff can give you the steps to request a hearing.
- If I feel I have been discriminated against I may file a complaint.
- Standards for eligibility for WIC are the same for everyone, regardless of race, color, national origin, age, disability or sex.

Your Responsibilities:

- Provide the most current and truthful information (WIC staff may verify this information is correct)
- Be the legal guardian, custodial parent, step parent married to the minor's parent, or foster parent of any minor you enroll in WIC.
- Keep your appointments and be on time. If you cannot keep your appointment, call your local WIC office to reschedule as soon as possible.
- Bring all documentation requested to each appointment
- Treat WIC and store staff with courtesy and respect.
- Buy only the foods listed on your WIC checks. Use the WIC foods only for the person on the program.
- Report address and/or phone changes at your next scheduled appointment.
- Keep your WIC checks safe; lost/stolen checks may not be replaceable

I Understand:

- My signature on this form allows staff of the SNAP and SNAP Nutrition Education Program; Medicaid; Perinatal, Child and Adolescent Health Unit; CSFP; and Immunization programs to see the information for purposes of outreach, referral, eligibility, and for administrative processes. They cannot share the information with a third party.
- That if I have intentionally lied to receive WIC benefits or if I violate the program rules that 1) I or my child can be taken off the program for up to one year, 2) I can face legal charges, and/or 3) I will have to pay money back to the program for foods or formula I should not have received.
- Presumptive eligible pregnant women found to have no nutritional risk within the first 60 days of certification will no longer be eligible for the Program and will receive no additional benefits.
- WIC may ask for social security number as allowed by law to verify Medicaid participation when applicable and for administrative purposes, such as, to prevent participation in more than one WIC program at the same time. Providing your number is optional.

REQUESTING A FAIR HEARING

If I am dissatisfied with any decisions made regarding the eligibility or receipt of benefits for my child or myself, the following procedure may be followed.

1. I may request a fair hearing by mail, verbally, or in writing to the WIC Program. My request should be made within 60 calendar days from the date of the written notice of denial or termination of benefits.
2. The Nebraska Department of Health and Human Services will notify me of the time, date and place of hearing at least 10 days before the hearing.
3. If my representative or I cannot appear at the scheduled time and place, I may request the hearing officer to change it. I will be provided one opportunity to reschedule the hearing date upon written request submitted to the Nebraska Department of Health and Human Services. If my representative or I do not appear for the hearing or if I request the hearing to be cancelled, it will be cancelled.
4. I may present my position personally or by a lawyer. A relative or a friend may assist me. I may look at my WIC records before and during the hearing and bring witnesses to the hearing.
5. I will be sent a written decision concerning the hearing within 45 calendar days after the hearing was requested.
6. If I do not agree with the decision at the hearing, I may appeal to the district court within 30 calendar days from the date on the written hearing decision.
7. The detailed Fair Hearing Procedures are on file with the Local Program Director. A copy is available on request.